FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H44955

(3)

DONAHUE MARITIME & AVIATION CONSULTANTS, INC.

FILED	
Apr 09 1998 8:00an	1
Secretary of State	

Principal Place	of Business	Mailing Address		* SOUTH A GIT CHANN DINC HAIDE BIND GHIL GIBLI BINDE OF BH DINC GUIL GINL GUN		
-200-00H96F=AVE-30H0-						
P O BOX 761		P O BOX 761		DO NOT MOITE IN THIS COACE		
PALM BEACH FL 33480 PALM BEACH FL 33480				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
				02/28/1985		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For		
21 233 MO	CKINGBIRD TRAIL	26 P.O. Box	761	59-2513659 Not Applicable		
Silve, Anta	The state of the s	Suite: Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional		
22		27		Fee Required		
City & State		City & State	El 1	6. Election Campaign Financing \$5.00 May Be		
23 PAL M Zip	BEACH FLA.	28 PALM BEAK	CH FLI			
24 3348		29 33480 3	PALM BEP	8. This corporation owes or has paid the current year Intangible ACH Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current		OL CONTACT POL	10. Name and Address of New Registered Agent		
НАН	MBY III, LOUIS L.		81 Name			
	ROYAL POINCIANA PLAZA		82 Street A	Address (P.O. Box Number is Not Acceptable)		
	M BEACH FL 33480		0.0007			
			83			
			84 City	■■ 85 Zip Code		
				FL (**)		
11. Pursuant to office or re	o the provisions of Sections 607.0502 : egistered agent, or both, in the State of	and 607.1508, Florida Statutes Florida, Such change was au	s, the above-named c	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered		
agent. I ar	n familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statutes.	poration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or publied name of registered agent	APAT.	Decide of Asset State	required when reinstating) DATE		
12.	OFFICERS AND		Registered Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPT	DELETE	1.1 TITLE	Change Addition		
NAME	DONAHUE, FRANKLYN W.		1.2 NAME	_ • _		
STREET ADDRESS	280 SUNSET AVE #207		1.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY-ST-ZIP			
TITLE	\$	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition		
NAME	Donahue, Franklyn W.		2.2 NAME			
STREET ADDRESS	280 SUNSET AVE #207		2.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BEACH FL		2. 4 CITY - ST - ZIP			
TITLE	DV	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition		
NAME	DONAHUE, DOROTHY		3.2 NAME			
STREET ADDRESS	280 SUNSET AVE #207		3.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BEACH FL	DELETE	3.4. CITY - ST - ZIP	Change Addition		
TITLE		CT DELETE	4.1 TITLE 4.2 NAME	Change (1) Addition		
STREET ADDRESS			4.2 HANGE 4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE	Change Addition		
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition		
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.						
Whatle O the alexander of the sure conti						

SIGNATURE:

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